2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2007
Secretary of State

DOCUMENT# P05000002982

Entity Name: TAMPA BAY INTEGRATORS, INC.

Current Principal Place of Business:

1030 SYLVIA LANE
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

1030 SYLVIA LANE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 61-1481803 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDERS, WALTER
16528 NORTH DALE MABRY HWY
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

ALL FLORDIA FIRM INC
813 DELTONA BLVD
SUITE A
DELTONA, FL 32725 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JAMISON MARK JESSUP 08/16/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PIKE, DUANE E
Address: 1030 SYLVIA LANE
City-St-Zip: TAMPA, FL 33613

Title: D ( ) Delete
Name: PIKE, THELMA M
Address: 1030 SYLVIA LANE
City-St-Zip: TAMPA, FL 33613

Title: VP ( ) Delete
Name: JOHNSON, SHARON
Address: 1030 SYLVIA LANE
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DUANE PIKE D 08/16/2007
Electronic Signature of Signing Officer or Director Date